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Form PTO/SB/21 (Modified)		General Transmittal Form	
		RECEIVED	
Application No.	09/721111	Attorney Docket	ARC2702N1
Filed (yyyy-mm-dd)	2000-11-22	Customer No.	30766
Applicant	David E. EDGREN	Confirmation No.	6123
Examiner	Edward J. Webman	Art Unit	1617
Title	Pharmaceutical Coating Composition and Method of Use		

ENCLOSURES (check all that apply)	
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Preliminary <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52/1.53 <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition to Revive Abandoned Application <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Petition <input type="checkbox"/> Power of Attorney <input type="checkbox"/> Associate <input type="checkbox"/> Revocation & New <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund	<input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (<i>Appeal Notice, Brief, Reply Brief</i>) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Acknowledgement Postcard <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Request for Corrected Notice of Allowability Remarks:
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm/Individual	Adenike A. Adewuya, Reg. 42,254
Signature	<i>Adenike Adewuya</i>
Date	2/3/05
CERTIFICATE OF TRANSMISSION/MAILING	
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.	
Typed or printed name	Adenike A. Adewuya
Signature	<i>Adenike Adewuya</i>
Date	2/3/05

SEND TO: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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REQUEST FOR CORRECTED NOTICE OF ALLOWABILITY

Honorable Sir:

The number of allowed claims noted on the cover of the Notice of Allowability included with the Notice of Allowance and Fee(s) Due dated January 26, 2005, is incorrect.

Applicant hereby requests that the number of allowed claims noted on the cover of the Notice of Allowability be amended to read as follows:

"The allowed claim(s) is/are **2 and 5-10.**"

Issuance of a supplemental Notice of Allowability reflecting the requested correction is respectfully requested.

Respectfully submitted,

Date: 2/3/05

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